

## AL0600 – Duty to Report Suspected Child Abuse and Neglect

Interior Health would like to recognize and acknowledge the traditional, ancestral, and unceded territories of the Däkelh Dené, Ktunaxa, Nlaka'pamux, Secwépemc, St'át'imc, syilx, and Tšilhqot'in Nations, where we live, learn, collaborate and work together.

Interior Health recognizes that diversity in the workplace shapes values, attitudes, expectations, perception of self and others and in turn impacts behaviors in the workplace. The dimensions of a diverse workplace includes the protected characteristics under the human rights code of: race, color, ancestry, place of origin, political belief, religion, marital status, family status, physical disability, mental disability, sex, sexual orientation, gender identity or expression, age, criminal or summary conviction unrelated to employment.

### 1.0 PURPOSE

This policy informs all Interior Health (IH) Employees of their responsibilities where there are concerns for the safety and well-being of a Child and/or where a Child has been or is likely to be physically, sexually, or emotionally harmed, and that the Parent is unwilling or unable to protect the Child or youth.

### 2.0 DEFINITIONS

| TERM  | DEFINITION   |
|---|--|
| <i>Abuse:</i>   | <i>There are five categories of Child maltreatment: physical abuse, emotional harm, sexual abuse, sexual exploitation, and neglect. Refer to <a href="#">B.C. Handbook for Action on Child Abuse and Neglect</a> for more information.</i>   |
| <i>Child:</i>   | <i>A person under 19 years of age, up to and including 18 years and 364 days, including youth (a person who is 16 years of age or over but is under 19 years of age), but does not include a Fetus.</i>  |
| <i>Child, Family and Community Service Act (CFCSA):</i> | <i><a href="#">Child, Family and Community Service Act BC</a> is provincial legislation that defines the mandate for child protection services in the province of BC.</i>  |
| <i>Child Welfare Worker:</i>                            | <i>A person delegated under CFCSA to provide child welfare services, including responses to suspected child abuse and neglect.</i>   |
| <i>Duty to Report:</i>                                  | <i>The responsibility to report any known or suspected child protection concerns. This duty supersedes an individual's right to privacy and is permitted without consent of the person under <a href="#">Section 33(2)(e)</a> of the Freedom of Information and Protection of Privacy Act.</i> |
| <i>Employee:</i>  | <i>All Interior Health staff, contractors, medical staff, volunteers, and students.</i>  |

|   |  |
|---|--|
| Policy Sponsor: Vice President of Clinical Operations, IH South   | 1 of 5                                       |
| Policy Steward: Executive Director, Clinical Operations, SOK  |  |
| Date Approved: July 2021  | Date(s) Reviewed-r/Revised-R: March 2025 (R) |
| <b><i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i></b> |  |

## AL0600 – Duty to Report Suspected Child Abuse and Neglect

|  |  |
|--|--|
| <i>Fetus:</i>  | <i>The unborn child from eight weeks after conception until birth.</i>   |
| <i>Indigenous Child and Family Service Agencies (ICFSA, previously known as DAA)</i> | <i>Through delegation agreements, the Provincial MCFD Director of Child Welfare gives authority to Indigenous Child and Family Service Agencies, previously known as Delegated Aboriginal Agencies, and their employees, have authority to undertake administration of all or parts of the Child, Family and Community Service Act. The amount of responsibility undertaken by each agency is the result of negotiations between the ministry and the Indigenous community served by the agency, and the level of delegation provided by the Director.</i> |
| <i>Ministry of Children &amp; Family Development (MCFD):</i>                         | <i>Organization that supports healthy child development through collaborative professional practice delivered across a range of services. They are a provincial organization that has duties to manage child protection.</i>   |
| <i>Parent</i>  | <i>As per the CFCSA, the definition of "parent" includes:<br/>(a) a person to whom guardianship or custody of a child has been granted by a court of competent jurisdiction or by an agreement, and<br/>(b) a person with whom a child resides and who stands in place of the child's parent or guardian, but does not include a caregiver, prospective adoptive parent or director.</i>   |
| <i>Reason to Believe:</i>  | <i>Concern based on what Employee has seen or information received that a Child has been or is likely to be at risk of abuse or neglect. This does not require certainty.</i>  |

### 3.0 POLICY

- 3.1 In accordance with s.14 of the CFCSA, all Interior Health Employees must be aware of, and alert to, signs of Child Abuse and have a Duty to Report concerns. This duty supersedes an individual's right to privacy and is permitted without consent.

#### When to Make a Report

- 3.2 When an Employee has Reason to Believe that:
- a) A Child has been or is likely to be at risk for Abuse or neglect, **AND** the Parent is unwilling or unable to protect the Child, or
  - b) A Child who is pregnant has been and is likely to be at risk of Abuse, **AND** the Parent is unwilling or unable to protect the Child, the Employee has a Duty to Report the concern to a Child Welfare Worker.

|   |  |
|---|--|
| Policy Sponsor: Vice President of Clinical Operations, IH South   | 2 of 5                                       |
| Policy Steward: Executive Director, Clinical Operations, SOK  |  |
| Date Approved: July 2021  | Date(s) Reviewed-r/Revised-R: March 2025 (R) |
| <b><i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i></b> |  |

## AL0600 – Duty to Report Suspected Child Abuse and Neglect

The legal Duty to Report includes youth from their 16th to 19th birthday. When an Employee has Reason to Believe that:

- c) A youth may be at risk **AND** the youth's Parent is unwilling or unable to protect the youth, the Employee has a legal Duty to Report concerns to a Child Welfare Worker.

- 3.3 If there is uncertainty about Parental willingness or ability to protect the youth, a report should be made to the Child Welfare Worker to assess the information further.
- 3.4 If an Employee is not sure whether the information they have requires making a report, the Employee will contact MCFD to discuss their concerns without mentioning any Client identifiers to determine if a formal report will be made. MCFD holds the ultimate responsibility of investigating the suspected Child Abuse.
- 3.5 **When Written Consent is Required to Report to MCFD.**  
Employees cannot report to MCFD any concerns they have about a Fetus without the written consent of the Parent (FORM #807429).
- 3.6 **Compliance**  
Anyone who fails to report Child Abuse or knowingly reports a false concern, will be considered to have committed an offence under the CFCSA section 14.6 and may be liable to a fine and/or imprisonment. Disciplinary action up to and including termination or loss of privileges may be taken and individuals may be reported to a regulatory body.

### 4.0 PROCEDURES

#### 4.1 Statutory Duty to Report to Police

Call 9-1-1 when:

- A Child is in imminent danger.
- Report concerns to a MCFD Child Welfare Worker after calling police

#### 4.2 Responsibilities.

4.2.1 All Employees:

- Report Child Abuse concerns to the MCFD.
- Comply with the provisions of this policy.
- Complete the corresponding required iLearn.
- Request site leadership and/or managers for additional training and education as needed.

|   |  |
|---|--|
| Policy Sponsor: Vice President of Clinical Operations, IH South   | 3 of 5                                       |
| Policy Steward: Executive Director, Clinical Operations, SOK  |  |
| Date Approved: July 2021  | Date(s) Reviewed-r/Revised-R: March 2025 (R) |
| <b><i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i></b> |  |

## AL0600 – Duty to Report Suspected Child Abuse and Neglect

### 4.2.2 Leaders and Managers:

- Confirm staff are familiar with policy and procedure.
- Ensure all Employees have completed the required iLearn.
- Confirm program/site procedures for reporting and documenting suspected Child Abuse or neglect are in alignment with the procedure outlined in section.

### 4.3 Submitting a Report to MCFD.

MCFD has a centralized intake to receive all reports of Child protection concerns 24 hours a day. The number to call anywhere in the province, 1-800-663-9122.

Information that should be provided to MCFD, if known, when making the report:

- Information about the Child: name, location, date of birth, language spoken, special needs;
- Whether there are any immediate concerns about the child's safety;
- Reasons for believing the child is at risk (include specific details);
- Any statements or disclosures made by the Child;
- Information about the family, Parents, and alleged offender;
- Information about siblings or other children or youth who may be at risk;
- Any previous incidents involving, or concerns about the Child;
- Information about other persons or agencies closely involved with the Child, and/or family;
- Information about other persons who may be witnesses or may have information about the child;
- Information about the nature of the Child's disabilities, their mode of communication, and the name of a key support person; and
- Any other relevant information concerning the Child, and/or family, such as language or culture.

The name of the Employee making the report will be kept confidential, unless it is required for the purpose of a court hearing. Refer to s.74 of the CFCSA for additional details. Furthermore, Health Records will redact the names of the reporting Employee from the chart in the event of a request for health records.

### 4.4 After the report is made

Employees are to document in accordance with professional standards and must include:

- 4.4.1 Specific details of information seen or heard regarding concerns of Child Abuse. (Refer to B.C. Handbook for Action on Child Abuse and Neglect for examples)
- 4.4.2 Document Child Welfare Worker contact information and any information provided.

|   |  |
|---|--|
| Policy Sponsor: Vice President of Clinical Operations, IH South   | 4 of 5                                       |
| Policy Steward: Executive Director, Clinical Operations, SOK  |  |
| Date Approved: July 2021  | Date(s) Reviewed-r/Revised-R: March 2025 (R) |
| <b><i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i></b> |  |

## AL0600 – Duty to Report Suspected Child Abuse and Neglect

- 4.4.3 Any interventions that the Employee took in response to the knowledge of suspected Child Abuse.

### 5.0 REFERENCES

1. Child, Family, and Community Service Act  
[http://www.bclaws.ca/civix/document/id/complete/statreg/96046\\_01#section13](http://www.bclaws.ca/civix/document/id/complete/statreg/96046_01#section13)
2. B.C. Handbook for Action on Child Abuse and Neglect  
[https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/public-safety/protecting-children/childabusepreventionhandbook\\_serviceprovider.pdf](https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/public-safety/protecting-children/childabusepreventionhandbook_serviceprovider.pdf)
3. Provincial Health Services Authority-Child Protection Policy  
<http://shop.healthcarebc.ca/phsa/PHSAPOD/Quality%20Safety/Risk%20Management/C-99-11-20566.pdf>
4. Fraser Health Authority-Clinical Policy: Reporting Suspected Child Maltreatment

|   |  |        |
|---|--|--------|
| Policy Sponsor: Vice President of Clinical Operations, IH South   |  | 5 of 5 |
| Policy Steward: Executive Director, Clinical Operations, SOK  |  |        |
| Date Approved: July 2021  | Date(s) Reviewed-r/Revised-R: March 2025 (R) |        |
| <b><i>This is an Interior Health CONTROLLED document. A copy of this document in paper form is not controlled and should be checked against the electronic file version to ensure accuracy.</i></b> |  |        |